L16000161495

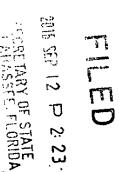
(Re	questor's Name)	<u> </u>
(Ad	dress)	
(Ad	dress)	<u> </u>
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nai	me)
(Do	ocument Number)	
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
:		

Office Use Only



200289173652

09/12/16--01019--016 **30.00



S Warren SEP 13 2016

COVER LETTER

TO:	Registration Se Division of Con			
***		Rentals and Sales LLC		
SUBJEC	CT:	Name of Lim	ited Liability Company	
The encl	losed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		Thomas P Grimm		
			Name of Person	
		SWFL RV Rentals and Sal	les LLC	
			Firm/Company	
		12942 Timber Ridge Dr		
			Address	
		Fort Myers FL 33913		
			City/State and Zip Code	
		SWFLRVRental@gmail.co	m to be used for future annual report not	dente de la constant
For furth	ner information c	oncerning this matter, please c		incation)
Tom Gri	imm		239 888-2929 at ()	
	Name o	f Person		ne Telephone Number
Enclosed	d is a check for th	ne following amount:	·	
S 25.0	00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Com (A Florida Limite	npany as it now appears on our rec ad Liability Company)	ords.)
The Articles of Organization for this Limited Liability Compar	ny were filed on	and assigned
Florida document number L16000161495		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
SWFL RV Rentals and Sales LLC		
The new name must be distinguishable and contain the words "Limited Liz	ability Company," the designation "I	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		(*) (*)
Principal office address MUST BE A STREET ADDRESS)		11
		第22 2
		1º 0
Enter new mailing address, if applicable:		STAL STAL
Mailing address MAY BE A POST OFFICE BOX)		DE N
3. If amending the registered agent and/or registered registered agent and/or the new registered office address h		rds, enter the name of th
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street add	iress
<u></u>		Florida
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

•	authorized Member		on e.a
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Remove
			Change
			□ Remove
			Change
			🗆 Add
			□ Remove
			Change
			Add
			□ Remove
		***************************************	☐ Change
			Add
			Remove
		ARY SIE	☐ Change
		OF STATE ORIDA	UA dd
		<u>—————————————————————————————————————</u>	□ Remove

☐ Change

,If amending any other	information, ente	r change(s) here: (Attach addi	itional sheets, if neces	sary.)
				· · · · · · · · · · · · · · · · · · ·
				
				
	<u> </u>			
	 			
	ne date must be specific in this block does no	and cannot be prior to date of filing or ot meet the applicable statutory fi		iling.) Pursuant to 605.0207 (3
the record specifies a) The 90th day after		re date, but not an effective ed.	e time, at 12:01 a.	m. on the earlier of:
Dated SCPT.	6TH	20/6		20133
			(")	in Arreston
	7 (-	Dum	- RET	20
	7 (-	of a member or authorized representation of a member of authorized representation of a member of a member of signed or printed name of signed	E. C	3 <u>1</u> 7 <u>1</u> 7 <u>1</u> 7

Page 3 of 3

Filing Fee: \$25.00